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Fill in this information to identify you	r case:	
United States Bankruptcy Court for		
Southern District of New	w York	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check amend

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name	Shaun			
	Write the name that is on your	First name	First name		
	government-issued picture identification (for example, your	<u>J</u>			
	driver's license or passport).	Middle name Parr	Middle name		
	Bring your picture identification to your meeting with the trustee.	Last name	Last name		
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)		
2	All other names you have				
2.	used in the last 8 years	First name	First name		
	Include your married or maiden names and any assumed, trade names and <i>doing business as</i>	Middle name	Middle name		
	names.	Last name	Last name		
	Do NOT list the name of any separate legal entity such as a				
	corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)		
		Business name (if applicable)	Business name (if applicable)		
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>8</u> <u>6</u> <u>5</u> <u>2</u>	xxx - xx		
	federal Individual Taxpayer	OR	OR		
	Identification number (ITIN)	9xx - xx	9xx - xx		

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Deb	tor 1 Shaun	J	Parr		Case number (if known)			
	First Name	Middle Name	Last Name					
		About Debtor 1:			About Debte	or 2 (Spouse Only in a Jo	oint Case):	
4.	Your Employer Identification Number (EIN), if any.			-				
		<u> </u>		_	EIN			
5.	Where you live				If Debtor 2 li	ives at a different addres	ss:	
		126 Frey Rd						
		Number Stree	et .		Number	Street		
		Pine Bush, NY 12	2566					
		City	State ZI	P Code	City	Star	te ZIP Code	
		Sullivan						
		County			County			
			dress is different from the that the court will send any address.		If Debtor 2's it in here. No at this mailin	s mailing address is diffe ote that the court will sen ng address.	erent from yours, fill d any notices to you	
		Number Stree	et		Number	Street		
		P.O. Box			P.O. Box			
		City	State ZI	P Code	City	Stat	te ZIP Code	
6.	Why you are choosing this	Check one:			Check one:			
	district to file for bankruptcy	Over the last 1 have lived in the district.	180 days before filing this phis district longer than in an	petition, I ny other	Over the have live district.	e last 180 days before fili ed in this district longer th	ng this petition, I nan in any other	
		I have another (See 28 U.S.C	r reason. Explain. C. § 1408)			nother reason. Explain. U.S.C. § 1408)		

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Debt	or 1	Shaun	J	Parr		Case nu	mber (if known)
		First Name	Middle Nar	me Last Nar	me	_ Gase na	The through
Part	: 2: Tell th	e Court About You	ur Bankrı	uptcy Case			
		r of the Bankruptcy re choosing to file	Bankrupt Cha		ption of each, see <i>Notice</i> o, go to the top of page 1		c. § 342(b) for Individuals Filing for riate box.
8.	How you wi	II pay the fee	detai chec a cre to Pa	ils about how you ma k, or money order. If edit card or check with ed to pay the fee in in ay The Filing Fee in In uest that my fee be v e may, but is not requal poverty line that ap	by pay. Typically, if you are your attorney is submitting that pre-printed address. Installments. If you choose installments (Official Form waived (You may request uired to, waive your fee, a poplies to your family size a pust fill out the Application	e paying the fee yourse of your payment on you e this option, sign and in 103A). this option only if you and may do so only if you and you are unable to	rk's office in your local court for more elf, you may pay with cash, cashier's ur behalf, your attorney may pay with attach the <i>Application for Individuals</i> are filing for Chapter 7. By law, a pur income is less than 150% of the pay the fee in installments). If you 7 Filing Fee Waived (Official Form
9.	Have you fi within the la	led for bankruptcy ast 8 years?		District Southern Di District District		Vhen 04/30/2020 MM / DD / YYYY Vhen MM / DD / YYYY MM / DD / YYYY	Case number 20-35527 Case number Case number
	pending or spouse who case with yo	nkruptcy cases being filed by a b is not filing this bu, or by a artner, or by an		District		enen	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rent	your residence?		□ No. Go to line 1□ Yes. Fill out <i>Init</i>			nst You (Form 101A) and file it

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Debtor 1 Shaun First Name		Shaun	J		Parr			Case number (if known)			
		Middle Name Last Name						Cass names (in mem)			
Par	t 3: Repor	t About Any Busin	essi	es You	Own as	a Sole Proprie	etor				
	торог	r ribout ring busin				•	, to i				
12.	-	ole proprietor of	✓	No. Go	to Part 4.						
	any full- or business?	part-time		Yes. Na	ame and lo	ocation of busines	ss				
		ietorship is a									
	•	u operate as an nd is not a separate such as a		Name of	f business, i	f any					
		partnership, or LLC.		Number	Stre	et					
		more than one sole ip, use a separate									
	sheet and at	tach it to this									
	petition.			City			St	tate	ZIP Code		
				Check the appropriate box to describe your business:							
				☐ He	alth Care I	Business (as defi	ned in 11 U.S.C. §	§ 101(27A))			
				☐ Sin	gle Asset	Real Estate (as c	lefined in 11 U.S.	C. § 101(51)	3))		
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))								
			Commodity Broker (as defined in 11 U.S.C. § 101(6))								
					☐ None of the above						
13.	13. Are you filing under Chapt 11 of the Bankruptcy Code and are you a small busine debtor or a debtor as defin by 11 U.S. C. § 1182(1)?		pro deb of c	If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor chapter of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small busine debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, st of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow procedure in 11 U.S.C. § 1116(1)(B).					usiness et, statement		
		on of small business	$ \sqrt{} $	No.	I am not	filing under Chap	ter 11.				
	debtor, see 101(51D).	debtor, see 11 U.S.C. § 101(51D).		No.	I am filing Bankrupt		11, but I am NOT	a small busi	ness debtor according to the definition	in the	
				Yes.					tor according to the definition in the er Subchapter V of Chapter 11.		
				Yes.		g under Chapter and I choose to pro			the definition in § 1182(1) of the Bank Chapter 11.	ruptcy	

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Debtor	1 Shaun	J	Parr		Case number (if known)
	First Name	Middle Nam	ne Last Name		
Part 4	Report if You Own or H	ave Any H	azardous Property or	Any Proper	ty That Needs Immediate Attention
14. D	o you own or have any	☑ No.			
al	roperty that poses or is lleged to pose a threat of	☐ Yes.	What is the hazard?		
ha	nminent and identifiable azard to public health or			-	
рі	afety? Or do you own any roperty that needs immediate ttention?		If immediate attention is	needed, why i	s it needed?
	or example, do you own erishable goods, or livestock				<u>-</u>
th	nat must be fed, or a building nat needs urgent repairs?				
			Where is the property?		
				Number	Street
				City	State ZIP Code

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Debtor 1	Shaun	J	Parr	Case number (if known)
	First Name	Middle Name	Last Name	()

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L	I am not required to receive a briefing about credit
	counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		Shaun	J	Parr	Parr		Case number (if known)		
First Name M		Middle Name Last Name					,		
Par	t 6: Answer	These Question	s for R	eporting Purposes					
		debts do you		Are your debts primarily con		er debts? Consumer debts are defor a personal, family, or househo			
				No. Go to line 16b. Yes. Go to line 17.					
			16b.	for a business or investment of No. Go to line 16c.		s debts? Business debts are debtough the operation of the busines			
				Yes. Go to line 17.					
			16c.	State the type of debts you ow	ve th	at are not consumer debts or bus	iness d	ebts.	
17.	Are you filin	g under Chapter 7?	Ą	No. I am not filing under Cha	apter	7. Go to line 18.			
	exempt prop and adminis paid that fun	nate that after any erty is excluded trative expenses ard ds will be available on to unsecured	.			Do you estimate that after any expand that funds will be available t			
18.	How many c	reditors do you t you owe?						000	
19.	How much d	o you estimate you worth?	, <u> </u>	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much d	lo you estimate you be?	r 🗆 🖠	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Par	t 7: Sign Be	elow							
Foi	r you	If I have States C	chosen ode. I u	to file under Chapter 7, I am awnderstand the relief available un	vare nder	each chapter, and I choose to pro	der Cha	apter 7, 11,12, or 13 of title 11, United	
				nd read the notice required by 1	_		i alloiii	ey to help the fill out this document, i	
I understand making a			king a false statement, conceal	ing _l	e 11, United States Code, specifie property, or obtaining money or pr or imprisonment for up to 20 year	operty	·		
		X /	s/ Shau	n J Parr					
		_		arr, Debtor 1					
Exe				on 01/30/2024 MM/ DD/ YYYY					

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Debtor 1	Shaun	J	Parr	Case number (if known)
	First Name	Middle Name	Last Name	Cuse number (# Niewi)
represented	For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		Chapter 7, 11, 12, or 13 of r which the person is eligible (b) and, in a case in which	his petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by a \$ 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/ Scott	J Goldstein	Date 01/30/2024
		·	of Attorney for Debtor	MM / DD / YYYY
		Scott J Go		
		Printed nan		oin LLC
		Firm name	es of Wenarsky & Goldst	eni LLC
		410 Route	10 West Ste 214	
		Number	Street	
		Ledgewoo	od	NJ 07852
		City		State ZIP Code
		Contact pho	one (973) 453-2838	Email address scott@wg-attorneys.com
		4291811		NY
		Bar number	r	State

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Fill in this information	to identify your case:			
Debtor 1	Shaun	J	Parr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:	So	uthern District of New Yor	<u>k</u>
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

n Fill out all

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

new Summary and check the box at the top of this page.	, ,
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$165,000.00 \$13,613.20 \$178,613.20
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$200,971.39
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$600.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$541.00
Your total liabilities Part 3: Summarize Your Income and Expenses	\$202,112.39
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$7,798.13
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$6,808.67

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24-35097 Debtor 1 Shaun Parr Case number (if known) -First Name Middle Name Last Name Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$10,962.91 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$600.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00

9g. Total. Add lines 9a through 9f.

\$600.00

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Fill in this inform	nation to identify you	r case and this filing:		
Debtor 1	Shaun	J	Parr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	Southern	District of New York	_
Case number				Check if this is an
				amended filing
Official For	m 106A/B			
		1		
Schedul	e A/B: Pro	perty		12/15
the category wh equally respons	ere you think it fits ible for supplying	s best. Be as complete correct information. If	and accurate as possible. If tw	fits in more than one category, list the asset in o married people are filing together, both are a separate sheet to this form. On the top of any
Part 1:	escribe Each Re	esidence, Building,	Land, or Other Real Estate	You Own or Have an Interest In
1. Do you ow	n or have any legal o	r equitable interest in an	y residence, building, land, or simi	ar property?
☐ No. Go	to Part 2.			
✓ Yes. Wh	nere is the property?			

Part 1	1: Describe Each Residen	ce, Building, Land, or Other Real Estate	You Own or Have an	Interest In
1. Do	No. Go to Part 2. Yes. Where is the property?	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$330,000.00 Describe the nature of you (such as fee simple, tena a life estate), if known. Fee Simple Check if this is comme (see instructions)	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$165,000.00 our ownership interest ancy by the entireties, or
	u have attached for Part 1. Write that	property identification number: Source of Value: Zillow Zestimate own for all of your entries from Part 1, including any number here	v entries for pages	\$165,000.00
you own		interest in any vehicles, whether they are registered vehicle, also report it on Schedule G: Executory Contractly vehicles, motorcycles		s

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Case number (if known) _

Debtor Parr, Shaun J

Who has an interest in the property? Check one. 3.1 Make: Do not deduct secured claims or exemptions. Put □ Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only ☐ Debtor 1 and Debtor 2 only Current value of the Current value of the Year: ☐ At least one of the debtors and another entire property? portion you own? Approximate mileage: ☐ Check if this is community property (see instructions) Other information: Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **√** No ☐ Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put ■ Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only ■ Debtor 1 and Debtor 2 only Current value of the Current value of the Year: ■ At least one of the debtors and another entire property? portion you own? Other information: ☐ Check if this is community property (see instructions) Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$0.00 you have attached for Part 2. Write that number here Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. Household goods and furnishings 6. Examples: Major appliances, furniture, linens, china, kitchenware ■ No Yes. Describe. \$2,400.00 Household Goods & Furnishings **Electronics** Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No Yes. Describe. TV, DVD Player, Movies, Cell Phone, Stereo, CDs \$650.00 24-35097 Doc 1 Filed 01/31/24 Entered 01/31/24 09:36:24 Main Document Pg 13 of 70

8.	Collectibles of value		
		gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ollections; other collections, memorabilia, collectibles	
	☐ No	, , , , , , , , , , , , , , , , , , , ,	
	Yes. Describe	Books & Photos	\$150.00
9.	Equipment for sports and	hobbies	
	Examples: Sports, photogra	aphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and try tools; musical instruments	
	☑ No		
	Yes. Describe		
10.	Firearms		
	Examples: Pistols, rifles, sh	notguns, ammunition, and related equipment	
	☐ No		
	Yes. Describe	Winchester savage 308 Rugar 22 long rifle	\$1,300.00
		accessories, ammo, safe	
11.	Clothes Examples: Everyday clothe	es, furs, leather coats, designer wear, shoes, accessories	
	✓ Yes. Describe	[****
	_	Wearing apparel & accessories	\$400.00
12.	Jewelry Examples: Everyday jewelr silver	ry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	
	Yes. Describe	Costume jewelry & watch	\$275.00
13.	Non-farm animals		
10.	Examples: Dogs, cats, bird	ls, horses	
	☑ No		
	Yes. Describe		
14.	Any other personal and ho	ousehold items you did not already list, including any health aids you did not list	
	☑ No		
	Yes. Give specific		
	information		
15.		of your entries from Part 3, including any entries for pages you have attached	\$5,175.00
Pa	rt 4: Describe You	ır Financial Assets	

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Do yo	ou own or have any lega	al or equitable interest in an	y of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No		me, in a safe deposit box, and on hand when y		\$300.00
17.		milar institutions. If you have r	nunts; certificates of deposit; shares in credit unimultiple accounts with the same institution, list of the list that the list		44.770.00
18.	Examples: Bond funds	17.1. Checking account: or publicly traded stocks , investment accounts with bro	Bank Of America acct ending 0544		\$1,758.20
19.	LLC, partnership, and ✓ No ☐ Yes. Give specific information about		rated and unincorporated businesses, inclu	% of ownership:	
20.	Negotiable instruments i	include personal checks, cash	tiable and non-negotiable instruments iers' checks, promissory notes, and money orde sfer to someone by signing or delivering them.	ers.	

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21.	Retirement or pension	accounts		
	Examples: Interests in	IRA, ERISA, Keogh, 40	1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	√ No			
	Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan:		
		Pension plan:		
		IRA:		
		Retirement account:		
		Keogh:		
		Additional account:		
		Additional account:		
22.	Examples: Agreements others	d deposits you have mad	le so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications companies, or	
	√ No			
	☐ Yes	In	stitution name or individual:	
		Electric:		
		Gas:		
		Heating oil:		
		Security deposit on ren	otal unit:	
		Prepaid rent:		
		Telephone:		
		Water:		
		Rented furniture:		
		Other:		
23.	Annuities (A contract fo	or a periodic payment of	money to you, either for life or for a number of years)	
	√ No			
		Issuer name and descr	iption:	
		· 		

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24.	Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(ount in a qualified ABLE program, or under a qualified b)(1).	state tuition program.	
	√ No			
	Yes Institution name a	nd description. Separately file the records of any interests.	11 U.S.C. § 521(c):	
25.	Trusts, equitable or future interests in p for your benefit	roperty (other than anything listed in line 1), and rights	or powers exercisable	
	√ No			
	Yes. Give specific information about them			
26.	Patents, copyrights, trademarks, trade			
		tes, proceeds from royalties and licensing agreements		
	√ No			
	Yes. Give specific information about them			
27.	Licenses, franchises, and other general Examples: Building permits, exclusive lice	intangibles enses, cooperative association holdings, liquor licenses, pro	ofessional licenses	
	√ No			
	Yes. Give specific			
	information about them			
Mone	ey or property owed to you?			Current value of the
				portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	☑ No			
	Yes. Give specific information about		Federal:	
	them, including whether you already filed the returns and			
	the tax years		State:	
	L		Local:	
29.	Family support			
		, spousal support, child support, maintenance, divorce settl	lement, property	
	√ No			
	Yes. Give specific information		Alimony:	
			Maintenance:	_
			Support:	-
			Divorce settlement:	
	L		Property settlement:	

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30.	Other amounts someone owes you	
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation	٦,
	Social Security benefits; unpaid loans you made to someone else	
	☑ No	_
	Yes. Give specific information	
31.	Interests in insurance policies	
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	□ No	
	✓ Yes. Name the insurance company of each policy and list its value Company name: Beneficiary:	Surrender or refund value:
	Universal Life Whole Life Policy Jennifer Parr	\$630.00
32.	Any interest in property that is due you from someone who has died	
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.	
	√ No	
	☐ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment	_
	Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	☑ No	
	☐ Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set	off
	claims	
	☑ No	<u> </u>
	Yes. Describe each claim	
35.	Any financial assets you did not already list	
	√ No	
	Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached	\$2,688.20
	for Part 4. Write that number here	ΨΣ,000.20
Do	art 5: Describe Any Business-Related Property You Own or Have an Interest In. List an	y roal actate in Dart 1
		y real estate ill Fart 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	✓ No. Go to Part 6.	
	Yes. Go to line 38.	
		Current value of the portion you own?
		Do not deduct secured claims or exemptions.

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Debtor	Parr, Shaun J	1 1100 01/01/21	18 of 70	Case number (if known)	J
38.	Accounts receivable or comm	issions you already earned	İ		
	√ No				
	☐ Ves Describe				

38.	Accounts receivable or	r commissio	ons you already	y earned				
	√ No							
	Yes. Describe	-						
39.	Office equipment, furni	ishings, and	d supplies					
	Examples: Business-rel electronic de		ıters, software, m	nodems, printers, copier	s, fax machines, rugs, te	lephones, desks, chairs,	,	
	₫ No							
	Yes. Describe							
]	
40.	Machinery, fixtures, equ	uipment, su	upplies you use	in business, and tool	s of your trade			
	√ No							
	Yes. Describe]	
41.	Inventory							
	√ No							
	Yes. Describe							
42.	Interests in partnership	ps or joint v	entures					
	√ No							
	Yes. Describe							
		Name of en	tity:			% of ownership:		
					_			
								_
43.	Customer lists, mailing	g lists, or ot	ther compilation	ns				
	√ No							
	Yes. Do your lists in	nclude pers	onally identifial	ble information (as def	ined in 11 U.S.C. § 101(4	11A)) ?		
	☐ No							
	Yes. Describ	be						
11	Any business-related p		u did not alread	lu liat				
44.		oroperty you	u ulu liot alleau	iy iist				
	✓ No☐ Yes. Give specific							
	information							
							<u> </u>	
							_	
							_	

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45.	Add the	dollar value of all	of your entries from Part 5, including any entries for pages you have attached	40.00
			per here	\$0.00
Pa	rt 6:	,	y Farm- and Commercial Fishing-Related Property You Own or Have an lave an interest in farmland, list it in Part 1.	Interest In.
46.	Do you	own or have any le	egal or equitable interest in any farm- or commercial fishing-related property?	
	☐ No. 0	Go to Part 7.		
	✓ Yes.	Go to line 47.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm an	imals		
	Example	es: Livestock, poult	ry, farm-raised fish	
	☐ No	Ī		
	⊻ Yes.		18 Sheep	\$600.00
48.	Crops—	either growing or	harvested	
	√ No			
		Give specific mation		
49.	Farm an	d fishing equipme	ent, implements, machinery, fixtures, and tools of trade	
	☐ No			
	√ Yes .		John Deere Tractor	\$5,000.00
50.	Farm an	d fishing supplies	, chemicals, and feed	
	☐ No			
	√ Yes .		Sheep Feed	\$150.00
51.	Any farr	m- and commercia	I fishing-related property you did not already list	
	√ No			
		Give specific mation		
52.			of your entries from Part 6, including any entries for pages you have attached per here	\$5,750.00
Pa	rt 7:	Describe All	Property You Own or Have an Interest in That You Did Not List Above	
53.			ty of any kind you did not already list? country club membership	
	<i>Example</i> ✓ No	o. Ocason lickels,	Country das membership	
	_	Give specific		
		mation		
				-

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54.	Add the dollar value of all of your entries from Part 7. Write	e that number here	→	\$0.00
Pa	rt 8: List the Totals of Each Part of this Fo	rm		
55.	Part 1: Total real estate, line 2		→	\$165,000.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$5,175.00		
58.	Part 4: Total financial assets, line 36	\$2,688.20		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$5,750.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$13,613.20	Copy personal property total	+ \$13,613.20
63.	Total of all property on Schedule A/B. Add line 55 + line 62.			\$178,613.20

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Fill in this information to identify your case:				
Debtor 1	Shaun	J	Parr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	So	uthern District of New	York
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	Exempt		
Which set of exemptions are you claiming? Color. 1. ☐ You are claiming state and federal nonbankle. 1. ☐ You are claiming federal exemptions. 11 U.S. 2. For any property you list on Schedule A/B that	ruptcy exemptions. 11 U.S S.C. § 522(b)(2)	s.C. § 522(b)(3)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: 1500 sqft 3 bed 2 bath house on about 2.2 acres 126 Frey Rd Pine Bush, NY 12566 Line from Schedule A/B: 1.1	\$165,000.00	\$27,900.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
Brief description: Household Goods & Furnishings	\$2,400.00	√ \$2,400.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6	ψ2, του.ου	☐ 100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption of n (Subject to adjustment on 4/01/25 and every 3 y ✓ No ☐ Yes. Did you acquire the property covered b ☐ No ☐ Yes	years after that for cases f	,	

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Debtor 1 Shaun Parr Case number (if known) ____ First Name Middle Name Last Name Part 2: Additional Page Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: $\sqrt{}$ 11 U.S.C. § 522(d)(3) TV, DVD Player, Movies, Cell Phone, Stereo, CDs \$650.00 ☐ 100% of fair market value, up I ine from to any applicable statutory limit Schedule A/B: Brief description: $\mathbf{\Lambda}$ 11 U.S.C. § 522(d)(3) \$150.00 \$150.00 Books & Photos ☐ 100% of fair market value, up Line from to any applicable statutory limit Schedule A/B: Brief description: 11 U.S.C. § 522(d)(3) \$1,300.00 Winchester savage 308 Rugar 22 long rifle \$1,300.00 100% of fair market value, up accessories, ammo, safe to any applicable statutory limit Line from Schedule A/B: Brief description: \$400.00 11 U.S.C. § 522(d)(3) \$400.00 Wearing apparel & accessories ☐ 100% of fair market value, up to any applicable statutory limit I ine from 11 Schedule A/B: Brief description: $\mathbf{\Lambda}$ 11 U.S.C. § 522(d)(4) \$275.00 Costume jewelry & watch 100% of fair market value, up to any applicable statutory limit 12 Schedule A/B: Brief description: 11 U.S.C. § 522(d)(5) \$300.00 \$300.00 Cash ☐ 100% of fair market value, up Line from to any applicable statutory limit 16 Schedule A/B: Brief description: $\sqrt{}$ 11 U.S.C. § 522(d)(5) \$1,175.00 \$1,758.20 Bank Of America acct ending 0544 ☐ 100% of fair market value, up Checking account to any applicable statutory limit Line from 17 Schedule A/B:

Brief description:

Line from

Schedule A/B:

Universal Life Whole Life Policy

 $\mathbf{\Lambda}$

\$630.00

\$630.00

to any applicable statutory limit

☐ 100% of fair market value, up

11 U.S.C. § 522(d)(7)

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Debtor 1	Shaun	J	Parr	Case numb	er (if known)
	First Name	Middle Name	Last Name		,
Part 2: Additi	onal Page				
	of the property a at lists this proper		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: 18 Sheep Line from Schedule A/B:	47		\$600.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: John Deere Trac Line from Schedule A/B:			\$5,000.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Sheep Feed Line from Schedule A/B:	_ 50		\$150.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

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			24 of 70				
Fill in this inform	nation to identify yo	ur case:					
Debtor 1	Shaun	ı	Parr				
Deptor 1	First Name	Middle Name	Last Name		-		
D-1-4 0							
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		-		
		0 11		V 1			
United States	Bankruptcy Court fo	or the: South	ern District of No	ew York			
Case number	(if						
known)						Check if amende	f this is an ed filing
00000	1000						. 3
Official For	m 106D						
Schedu	le D: Cre	editors Who	o Have Claims	Secure	d by F	Property	12/15
Po as complete	and accurate as n	assible. If two marries	I people are filing together, bot	h are equally re-	noncible for	cumplying correct inf	ormation If
			ut, number the entries, and atta				
	number (if known		,		•		,
. Do any cree	ditors have claims	secured by your prop	erty?				
			t with your other schedules. You	have nothing else	to report on	this form.	
✓ Yes. Fill	in all of the informa	tion below.					
Part 1:	List All Secured	Claims					
				Colum	ın Δ	Column B	Column C
			ne secured claim, list the creditor as a particular claim, list the other		nt of claim	Value of collateral	Unsecured
			s in alphabetical order according	to the	deduct the	that supports this	portion
creditor's n	ame.		, , , , , , , , , , , , , , , , , , ,			claim	If any
2.1 ROCKET	MORTGAGE, LLC	Describe	the property that secures the	claim:	\$200,971.39	\$165,000.00	\$35,971.39
Creditor's	Name	1500 sat	t 3 bed 2 bath house on about 2	2 acres			
1050 WO	ODWARD AVE	·	Rd Pine Bush, NY 12566	2 acres			
Number	Street		e date you file, the claim is: Che	ck all that apply			
		Conti	· ·	on all triat apply.			
DETROIT	Г, MI 48226	Unliq	-				
City	State	ZIP Code Dispu					
Who owe	s the debt? Check	•	f lien. Check all that apply.				
✓ Debto	r 1 only	☐ An ac	reement you made (such as mor	tgage or secured	car loan)		
Debto	•	_ `	tory lien (such as tax lien, mechar	0 0	,		
	r 1 and Debtor 2 or		ment lien from a lawsuit	•			
	st one of the debtor		(including a right to				
anothe		offset)				
	k if this claim relat nunity debt	es to a					
Date debt	t was incurred	11/14/2016 Last 4 di	gits of account number 1	7 4 4			

\$200,971.39

Add the dollar value of your entries in Column A on this page. Write that number here:

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Debtor 1	Shaun	J		Parr		number (if known)		
	First Name	Middle Na	me L	ast Name				
Don't 1.	Additional Pa	ge				Column A Amount of claim	Column B Value of collateral	Column C Unsecured
Part 1:	After listing any followed by 2.4		page, numb	er them beginning	y with 2.3,	Do not deduct the value of collateral.	that supports this claim	portion If any
2.2			Describe the	e property that sec	cures the claim:			
Creditor	's Name							
Numbe	r Street		As of the da	ite you file, the cla	im is: Check all tha	at apply.		
			☐ Continge☐ Unliquida					
City	State	ZIP Code	☐ Disputed					
Who ov	wes the debt? Che	eck one.	Nature of lie	en. Check all that ap	pply.			
☐ Deb	otor 1 only		☐ An agree	ement you made (su	ich as mortgage or	secured car loan)		
Deb	otor 2 only		Statutory	lien (such as tax lie	n, mechanic's lien)			
Deb	otor 1 and Debtor 2	only	Judgmer	nt lien from a lawsui	t			
	east one of the deb ther	otors and	Other (in offset)	cluding a right to	_			
	eck if this claim re nmunity debt	elates to a						
Date de	ebt was incurred		Last 4 digits	s of account numb	er			
Add the	e dollar value of y	our entries in C	olumn A on	this page. Write th	at number here:	\$0.00		
	s the last page of hat number here:	your form, add	the dollar va	lue totals from all	pages.	\$200,971.39		

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				26 of 7	0			_
Fill in this inform	nation to identify your ca	ase:						
Debtor 1	Shaun	J		Parr				
200101	First Name	Middle Na	me	Last Name				
Debtor 2								
(Spouse, if filing)	First Name	Middle Na	me	Last Name				
United States F	Bankruptcy Court for the	0.	Southern	District of	New York			
	Sankrupicy Court for the	e						
Case number (if known)							☐ Check if	this is an
(**************************************							amende	d filing
Official For	m 106E/F							
Cabadu		ditor	c \//b.		ecoured Cla	imac		
<u>scheau</u>	ie E/F: Cre	eartor	S VVIII	o Have Un	secured Cla	11115		12/15
•	•				claims and Part 2 for cree			
	•	•			claim. Also list executory			
•		•		•	Official Form 106G). Do no operty. If more space is nee	•	•	•
				•	page. On the top of any ac		-	
number (if know	n).							
Part 1:	ist All of Your PRI	ORITY Un	secured (Claims				
1. Do any cre	editors have priority u	nsecured c	laims agair	nst you?				
☐ No. Go	to Part 2.							
✓ Yes.								
2. List all of v	our priority unsecure	ad claime If	f a creditor h	nas more than one prio	rity unsecured claim, list the	creditor separate	aly for each clair	m For each
•	•			•	riority amounts, list that claim	•	•	
	•		•	•	the creditor's name. If you ha		o priority unsect	ured claims,
fill out the C	Continuation Page of Page	art 1. If more	e than one o	reditor holds a particul	ar claim, list the other credito	ors in Part 3.		
(For an exp	planation of each type of	of claim, see	the instruct	ions for this form in the	e instruction booklet.)			
						Total claim	Priority	Nonpriority
							amount	amount
2.1 IRS			Last 4 digi	its of account numbe	r <u>———</u>	\$600.00	\$600.00	\$0.00
•	editor's Name		When was	the debt incurred?	2021			
Attn: Cent	tralized Insolvency							
PO Box 7								
Number	Street		_		n is: Check all that apply.			
	hia, PA 19101	71D.O. I	☐ Conting	•				
City	State Z	IP Code	☐ Unliquie☐ Dispute					
Who incu	rred the debt? Check	one.	☐ Dispute	eu				
✓ Debtor	•		Type of PF	RIORITY unsecured c	aim:			
Debtor	•		_	tic support obligations				
	1 and Debtor 2 only				you owe the government			
_	st one of the debtors an	nd another			njury while you were intoxica	ated		
☐ Check	if this claim is for a		Other.	Specify				

✓ No ☐ Yes

community debt

Is the claim subject to offset?

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Debtor 1 Parr Shaun Case number (if known) First Name Middle Name Last Name Part 1: Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount NY State Division of Taxation Last 4 digits of account number \$0.00 unknown unknown Priority Creditor's Name When was the debt incurred? Bankruptcy/Special Procedures Section Po Box 5300 As of the date you file, the claim is: Check all that apply. Number Street Albany, NY 12205 Contingent ZIP Code ■ Unliquidated State Disputed Who incurred the debt? Check one. **☑** Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only ✓ Taxes and certain other debts you owe the government ☐ At least one of the debtors and another ☐ Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a Other. Specify community debt Is the claim subject to offset? **☑** No Yes

24-35097 Doc 1 Filed 01/31/24 Entered 01/31/24 09:36:24 Main Document 28 of 70 Parr Debtor 1 Shaun Case number (if known) _ Middle Name Last Name First Name Part 2: **List All of Your NONPRIORITY Unsecured Claims** Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. **√** Yes List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim CAPITAL ONE** Last 4 digits of account number 4 2 6 \$541.00 Nonpriority Creditor's Name When was the debt incurred? 2/3/2016 Attn: Bankruptcy PO Box Box 30285 As of the date you file, the claim is: Check all that apply. Number Street Contingent Salt Lake City, UT 84130 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes 4.2 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated

Who incurred the debt? Check one.

■ At least one of the debtors and another

☐ Check if this claim is for a community debt

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ Debtor 1 only

☐ Debtor 2 only

☐ No☐ Yes

ZIP Code

Disputed

Student loans

priority claims

Other. Specify

Type of NONPRIORITY unsecured claim:

Obligations arising out of a separation agreement or divorce that you did not report as

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Shaun J Parr Case number (if known)

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

First Name

6i.

Middle Name

Other. Add all other nonpriority unsecured claims.

Write that amount here.

Total. Add lines 6f through 6i.

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims Domestic support obligations** 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$600.00 Claims for death or personal injury while you were \$0.00 intoxicated Other. Add all other priority unsecured claims. \$0.00 6d. 6d. Write that amount here. Total. Add lines 6a through 6d. 6e. \$600.00 **Total claim Total claims** 6f. Student loans 6f. \$0.00 from Part 2 Obligations arising out of a separation agreement or \$0.00 6g. 6g. divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other 6h. \$0.00 similar debts

6i.

6j.

\$541.00

\$541.00

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Fill in this information	n to identify your case	:		
Debtor 1	Shaun	J	Parr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	So	uthern District of New York	
Case number (if known)				☐ Che

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with wh	om you ha	ve the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

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				31 of 70		
Fill in	this inform	ation to identify you	ur case:			
Debt	or 1	Shaun	J	Parr		
		First Name	Middle Name	Last Name		
Debt						
(Spot	use, if filing)	First Name	Middle Name	Last Name		
Unite	ed States E	Bankruptcy Court fo	r the: Souther	n District of N	lew York	
Case (if kno	e number					☐ Check if this is an
(amended filing
Offic	ial For	m 106H				
Sch	nedu	le Η: Υοι	ır Codebtor	`S		12/15
filing to	ogether, b	oth are equally re	sponsible for supplying	correct information. If more	space is needed, copy the A	ossible. If two married people are dditional Page, fill it out, and numbe ite your name and case number (if
1.	Do you h ☑ No ☐ Yes	ave any codebtors	s? (If you are filing a joint	case, do not list either spouse	as a codebtor.)	
2.	California No. G Yes. D	, Idaho, Louisiana, lo to line 3. Did your spouse, for	Nevada, New Mexico, Pu	erto Rico, Texas, Washington, ivalent live with you at the time	and Wisconsin.)	and territories include Arizona, current address of that person.
	_		e, former spouse, or legal		This in the hand and	ourion addition of that persons
						
	N	umber	Street			
	C	ity	State	ZIP Code		
3.	2 again a	s a codebtor only	if that person is a guara	intor or cosigner. Make sure	you have listed the creditor of	h you. List the person shown in line on <i>Schedule D</i> (Official Form 106D), <i>Schedule G</i> to fill out Column 2.
	Column 1	: Your codebtor			Column 2: The credito	or to whom you owe the debt
					Check all schedules th	at apply:
3.1						
	Name				Schedule D, line	
	Number		Street		Schedule E/F, line	
					Schedule G, line	
	City		State	ZIP C	Code	
3.2						
	Name				Schedule D, line _	
	Number		Street		Schedule E/F, line	

ZIP Code

State

City

☐ Schedule G, line ____

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				32 of	⁷⁰					J	
Fil	in this information t	o identify your ca	se:								
D	ebtor 1	Shaun	J Par	r							
		First Name	Middle Name Last	Name							
	ebtor 2							Oh a	al. if their in.		
(3	Spouse, if filing)	First Name	Middle Name Last	Name				_	ck if this is: In amended filing	1	
U	nited States Bankru	ptcy Court for the	Southern I	District of Nev	w Yorl	<u>k</u>		_	supplement sho		petition
_	ase number known)								hapter 13 income		
_							_	N	MM / DD / YYYY	_	
Of	ficial Form	106I									
S	chedule I:	— Your Ind	come								12/15
			le. If two married people are	filing to wath	/D-	bton 4 and 1) - h + - = 0 \ h	-41			
		mployment	case number (if known). Ans	swer every qu	uestio	n.					
1.	Fill in your employ information.	ment		Debtor 1	1				Debtor 2 or nor	n-filing spo	ouse
	If you have more th	nan one job,	Employment status	☑ Employed	ı 🗆 n	lot Employe	t		Employed \square No	t Employe	d
	attach a separate prinformation about a employers.	•	Occupation	Electriciaan							
	Include part time, s	seasonal, or	Employer's name	Alpine Air He	eating	& Air Condi	tioning	Kro	gslund, Keating	& Behrens	CPAs PC
	self-employed wor	k.	Employer's address	60 N Main S	t			20	Grove St		
	Occupation may in or homemaker, if it			Number Stree					imber Street		
				Florida, NY	10921			Mid	Idletown, NY 109	940	
			How long employed there?	City 1 vear		State	Zip Code	Cit	y months	State	Zip Code
			gp.e,ou	<u>. you.</u>				<u> </u>		_	
Pa	art 2: Give Detai	Is About Mon	thly Income								
	-		e date you file this form. If yo	ou have nothii	ng to	report for an	y line, write	\$0 in the	space. Include y	our non-fil	ing spouse
	unless you are sep If you or your non- more space, attach	filing spouse hav	e more than one employer, c	ombine the in	nforma	ation for all e	mployers fo	r that per	son on the lines	below. If y	ou need
	oro opado, anadi	. a soparate silet				For	Debtor 1	For D	ebtor 2 or		
									iling spouse		
2.			and commissions (before all culate what the monthly wag		2.	\$6	6,129.07		\$4,333.33		
3.	Estimate and list r	monthly overtime	е рау.		3.	+	\$332.51	+	\$0.00		
								. —			

\$6,461.58

\$4,333.33

4. Calculate gross income. Add line 2 + line 3.

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33 of 70 Debtor 1 Shaun Parr Case number (if known) -First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$6,461.58 \$4,333.33 Copy line 4 here.....→ 4. 5. List all payroll deductions: \$1,765.88 \$862.80 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. 5d. Required repayments of retirement fund loans \$0.00 \$0.00 5d. \$178.56 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. Specify: See additional page \$189.54 \$0.00 5h. \$1,955.42 \$1,041.36 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$4,506.16 \$3,291.97 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 \$0.00 monthly net income. 8a. \$0.00 \$0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive 9. 10 11

	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$0.00		\$0.0	00	
8	Bd. Unemployment compensation	8d.		\$0.00		\$0.0	00	
8	Be. Social Security	8e.		\$0.00		\$0.0	00	
8	Bf. Other government assistance that you regularly receive							
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	_	\$0.00		\$0.0	00	
8	g. Pension or retirement income	8g.		\$0.00		\$0.0	00	
8	Bh. Other monthly income. Specify:	8h.	+_	\$0.00	-	+ \$0.	00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		\$0.00] [\$0.	00	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.		\$4,506.16	+	\$3,291	97	\$7,798.13
11.	State all other regular contributions to the expenses that you list in Scheo	lule J.						
f	nclude contributions from an unmarried partner, members of your househol riends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a		•	. •		•	J.	
5	Specify:						11. 🕇	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics			•	inco	me. Write that	12.	\$7,798.13
								Combined monthly income
	Do you expect an increase or decrease within the year after you file this for No. ✓ No.	orm?						
[☐Yes. Explain:							
[Yes. Explain:							

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Debtor 1 Shaun J Parr Case number (if known)
First Name Middle Name Last Name

Amount

5h. Other Deductions For Debtor 1
Tools

\$189.54

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Fill in this information	on to identify your ca	ase:				
Debtor 1 Debtor 2 (Spouse, if filing)	Shaun First Name	Middle Name La	Parr ast Name ast Name		if this is: amended filing upplement showing enses as of the fol	g postpetition chapter 13 lowing date:
United States Bank Case number (if known)	kruptcy Court for the	e: Souther	n District of New York	_	/ DD / YYYY	
Official Form		xpenses				12/15
•	ach another sheet	to this form. On the top of	are filing together, both are of any additional pages, write			orrect information. If more own). Answer every question
□ _{No}	e 2. ebtor 2 live in a se	parate household? e Official Form 106J-2, <i>Exp</i>	penses for Separate Househo	old of Debtor 2.		
2. Do you have de Do not list Debtor Debtor 2. Do not state the names.	ependents? or 1 and	☐ No ☑ Yes. Fill out this info	Dependent's rel	ationship to	Dependent's age	Does dependent live with you?

3. Do your expenses include expenses of people other than yourself and your dependents?

√ No ☐Yes

Include expenses paid for with non-cash government assistance if you know the value of

Part 2: Estimate Your Ongoing Monthly Expenses

4d. Homeowner's association or condominium dues

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Child

□_{No.} **☑**Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes. ☐ No. ☐ Yes.

\$0.00

Your expenses such assistance and have included it on Schedule I: Your Income (Official Form 106I.) The rental or home ownership expenses for your residence. Include first mortgage payments and any rent 4. \$1,682.08 for the ground or lot. If not included in line 4: 4a. \$0.00 4a. Real estate taxes 4b. \$0.00 4b. Property, homeowner's, or renter's insurance 4c. 4c. Home maintenance, repair, and upkeep expenses \$0.00 4d.

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 Debtor 1
 Shaun
 J
 Parr
 Case number (if known)
 —

 First Name
 Middle Name
 Last Name

	Yo	ur expenses
Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
Utilities:		
6a. Electricity, heat, natural gas	6a. <u>—</u>	\$350.00
6b. Water, sewer, garbage collection	6b	\$50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$375.00
6d. Other. Specify:	6d.	\$0.00
Food and housekeeping supplies	7.	\$1,200.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$250.00
0. Personal care products and services	10.	\$150.00
Medical and dental expenses	11.	\$270.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$600.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$150.00
4. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a	\$103.99
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c.	\$206.56
15d. Other insurance. Specify:	15d.	\$0.00
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00
7. Installment or lease payments:		
	17a.	\$821.04
17a. Car payments for Vehicle 1	17b.	\$0.00
17b. Car payments for Vehicle 2	17c.	\$600.00
17c. Other. Specify: Spouse's Credit Cards/Student Loans/Etc	 17d.	
17d. Other. Specify:		\$0.00
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$0.00
9. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	2.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Debtor 1		Shaun	J	Parr	Case number (if known)	
		First Name	Middle Name	Last Name		
21.	Other. Spe	ecify:			21. +	\$0.00
22.	Calculate	your monthly exp	enses.			
	22a. Add I	ines 4 through 21.			22a	\$6,808.67
	22b. Copy	line 22 (monthly e	expenses for Debtor 2),	f any, from Official Form 106J-2	22b	\$0.00
	22c. Add li	ine 22a and 22b. T	The result is your month	y expenses.	22c	\$6,808.67
23.	Calculate	your monthly net	income.			
	23a. Copy	line 12 (your com	bined monthly income)	rom Schedule I.	23a	\$7,798.13
	23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b	\$6,808.67
	23c. Subtr	act your monthly e	expenses from your mor	thly income.		
	The	result is your <i>mont</i>	thly net income.		23c	\$989.46
24.	•	•	•	penses within the year after you file		
				car loan within the year or do you e of a modification to the terms of you		
	☐ No. ☑ Yes.	Explain here: Daughter is goir	ng to College Fall 2024			

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Fill in this information	to identify your case	:	
Debtor 1	Shaun	J	Parr
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bank	ruptcy Court for the:	So	uthern District of New York
Case number (if known)			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an a ☑ No	attorney to help you fill out bankruptcy forms?
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the	summary and schedules filed with this declaration and that they are true and correct.
/s/ Shaun J Parr Shaun J Parr, Debtor 1	_
Date 01/30/2024 MM/ DD/ YYYY	

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Fill in this information	to identify your case:			
Debtor 1	Shaun	J	Parr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		So	uthern District of Nev	York
Case number (if known)				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Dates Debtor 2 lived
uieie
Same as Debtor 1
From
То
Code
☐ Same as Debtor 1
From
To
Code

Parr Debtor 1 Shaun Case number (if known) _ First Name Middle Name Last Name Part 2: Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross Income** Sources of income **Gross Income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, commissions, Wages, commissions, From January 1 of current year until the \$5,538.12 \$3,090.00 bonuses, tips bonuses, tips date you filed for bankruptcy: Operating a business Operating a business ✓ Wages, commissions, For last calendar year: ✓ Wages, commissions, \$72,375.63 \$48,885.94 bonuses, tips bonuses, tips (January 1 to December 31, 2023 Operating a business Operating a business ✓ Wages, commissions, For the calendar year before that: Wages, commissions, \$76,879.00 bonuses, tips bonuses, tips (January 1 to December 31, 2022 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross Income from** each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: Unemployment \$3,528.00 (January 1 to December 31, For the calendar year before that: (January 1 to December 31, 2022

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ebtor 1	Shau	n	J		Parr		_ Cas	e number (if	known)
	First N			e Name	Last Nar			,	,
art 3: L	ist Certa	in Payme	ents You	ı Made Be	efore You Fil	led for Bankruptcy			
. Are eith	er Debtor 1	l's or Debte	or 2's deb	ts primarily	consumer de	bts?			
☐ No.					arily consume	er debts. Consumer deb old purpose."	ts are defined in 11 l	U.S.C. § 101	(8) as "incurred by
	During th	ne 90 days	before yo	u filed for b	ankruptcy, did	you pay any creditor a t	otal of \$7,575* or mo	ore?	
	☐ No. G	o to line 7.							
	☐ Yes.	paid that	creditor. [Do not inclu	de payments f	total of \$7,575* or more or domestic support oblicankruptcy case.			
	* Subject	t to adjustm	nent on 4/	01/25 and 6	every 3 years a	after that for cases filed	on or after the date of	of adjustmen	t.
√ Yes.				•	arily consume				
	_	•	•	u filed for b	ankruptcy, did	you pay any creditor a t	otal of \$600 or more	?	
	✓ No. G	o to line 7.							
	Yes.	include pa	ayments f		support oblig	total of \$600 or more ar ations, such as child sup			
					Dates of payment	Total amount pa	id Amount yo	u still owe	Was this payment for
									Mortgage
	Creditor's N	ame						_	☐ Car
									☐ Credit card
	Number	Street							Loan repayment
									☐ Suppliers or vendors
									Other
	City		State Z	ZIP Code					Utner
<i>nsiders</i> in ou are an	clude your officer, dir	relatives; a ector, pers	any gener on in con	al partners; trol, or own	relatives of ar er of 20% or m		nerships of which you	ou are a gene ging agent, ir	eral partner; corporations of wh ncluding one for a business you
Yes.	List all pay	ments to a	n insider.						
					ates of ayment	Total amount paid	Amount you still owe	Reason	for this payment
					•				
Insider's I	Name								
Insider's I	Name Street								

Middle Name J filed for bankruptc guaranteed or cosig that benefited an ins	s y, did you make any gned by an insider.				
u filed for bankruptc guaranteed or cosig that benefited an ins	ey, did you make any gned by an insider. sider. Dates of	payments or transfer	Amount you still	Reason for th	is payment
guaranteed or cosign	gned by an insider. sider. Dates of		Amount you still	Reason for th	is payment
	Dates of	Total amount paid			
State ZIP Code				Include credito	or's name
State ZIP Code	- ————————————————————————————————————				
State ZIP Code	 				
State ZIP Code	-				
Julio Zii Oude					
	ature of the case	Cou	rt or agency		Status of the case
					Pending
		Court	Name		☐ On appeal ☐ Concluded
		Numb	er Street		
		City	Sta	ate ZIP Code	
	u filed for bankrupto ding personal injury o	u filed for bankruptcy, were you a party it ding personal injury cases, small claims at his case. Nature of the case	Nature of the case Court Numb	u filed for bankruptcy, were you a party in any lawsuit, court action, or administrative ding personal injury cases, small claims actions, divorces, collection suits, paternity actions. Nature of the case Court or agency Court Name Number Street	u filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? ding personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or Nature of the case Court or agency Court Name Number Street

Doc 1 Filed 01/31/24 Entered 01/31/24 09:36:24 Main Document 24-35097 Pq 43 of 70 Debtor 1 Shaun Parr Case number (if known) First Name Middle Name Last Name Describe the property Value of the property **Date** Creditor's Name **Explain what happened** Number Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. City State ZIP Code 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **✓** No Yes. Fill in the details. Describe the action the creditor took Date action was Amount taken Creditor's Name Number State ZIP Code City Last 4 digits of account number: XXXX-_______ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **✓** No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **√**No Yes. Fill in the details for each gift.

Doc 1 Filed 01/31/24 Entered 01/31/24 09:36:24 Main Document 24-35097 Pq 44 of 70 Debtor 1 Shaun Parr Case number (if known). First Name Middle Name Last Name Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you _ 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Value Gifts or contributions to charities Describe what you contributed Date you that total more than \$600 contributed Charity's Name Number Street City State ZIP Code Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **✓** No Yes. Fill in the details. Value of property lost Describe the property you lost and Describe any insurance coverage for the loss Date of your loss how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

bur behalf pay or transervices required in your behalf pay or transervices required in your baservices required in		o anyone you consulted Amount of payment \$500.00 \$250.00 \$250.00 \$250.00 \$250.00
d costs; d costs.	Date payment or cransfer was made 1/26/2023 1/7/28/2023 1/8/04/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023	\$500.00 \$250.00 \$250.00 \$250.00 \$250.00
d costs; d costs.	Date payment or cransfer was made 1/26/2023 1/7/28/2023 1/8/04/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023 1/8/2023	\$500.00 \$250.00 \$250.00 \$250.00 \$250.00
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tr. d costs; d costs; d costs; d costs; d costs 07 08 8/ 08	7/26/2023 7/28/2023 8/04/2023 1/11/2023 1/18/2023 1/8/04/2023	\$500.00 \$250.00 \$250.00 \$250.00
tr. d costs; d costs; d costs; d costs; d costs 07 08 8/ 08	7/26/2023 7/28/2023 8/04/2023 1/11/2023 1/18/2023 1/8/04/2023	\$500.00 \$250.00 \$250.00 \$250.00
d costs; 7/2 d costs; d costs 07 08 8/	17/28/2023 18/04/2023 1/11/2023 1/18/2023 18/04/2023	\$250.00 \$250.00 \$250.00 \$250.00
07 08 8/ 08 08	8/04/2023 5/11/2023 5/18/2023 8/04/2023	\$250.00 \$250.00 \$250.00
8/ 8/ 08	5/11/2023 5/18/2023 5/04/2023	\$250.00 \$250.00
8/	18/04/2023 18/04/2023	\$250.00
08	08/04/2023	·
	<u></u> -	\$250.00
8/	//11/2022	ΨΞ00.00
	/11/2023	\$250.00
8/	/18/2023	\$250.00
	Date payment or ransfer was made	Amount of payment
		transfer any property to anyone, other that

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otor 1	Shaun	J	Parr	Ca	se number (if known)	
	First Name	Middle	Name Last Name Description and value of propertransferred	perty Describe any property received or debts paid		Date transfer was made
Person W	Vho Received Transfe	r			_	
Number	Street					
City	State	ZIP Code				
Person's	s relationship to you	u ———				
√ No ☐ Yes.	Fill in the details.		Description and value of the	property transferred		Date transfer was
Name of	f trust				_	
-t 8: L	ist Certain Fina	ıncial Acco	unts, Instruments, Safe D	Deposit Boxes, and Storage U	nits	
. Within transfer	1 year before you rred? lecking, savings, m	filed for bank	ruptcy, were any financial acc	Deposit Boxes, and Storage Uncounts or instruments held in your retificates of deposit; shares in banks,	name, or for your benef	
. Within transfer clude change, coo	1 year before you rred? lecking, savings, m	filed for bank	ruptcy, were any financial acc	counts or instruments held in your r	name, or for your benef	
Within transfer lude chads, coo	11 year before you rred? lecking, savings, m pperatives, associat	filed for bank	ruptcy, were any financial acc	counts or instruments held in your retificates of deposit; shares in banks, Type of account or instrument c	name, or for your benef	
Within transfer lude chi ds, coo Manage Yes.	11 year before you rred? lecking, savings, m pperatives, associat	filed for bank	ruptcy, were any financial acc or other financial accounts; cer er financial institutions.	counts or instruments held in your retificates of deposit; shares in banks, Type of account or instrument c	name, or for your beneft credit unions, brokerage date account was losed, sold, moved, or	Last balance before closing or
. Within transfer clude chinds, coo ✓ No Yes.	11 year before you rred? necking, savings, m operatives, associat Fill in the details.	filed for bank	ruptcy, were any financial according of the financial accounts; cere financial institutions. Last 4 digits of account numerous	counts or instruments held in your restriction to tificates of deposit; shares in banks, the shares of deposit; shares of depos	name, or for your beneft credit unions, brokerage date account was losed, sold, moved, or	Last balance before closing or
Within transferent value changes, coo √ No Yes.	a 1 year before you rred? ecking, savings, m operatives, associat Fill in the details.	filed for bank	ruptcy, were any financial according of the financial accounts; cere financial institutions. Last 4 digits of account numerous	counts or instruments held in your restriction to tificates of deposit; shares in banks, the same of t	name, or for your beneft credit unions, brokerage date account was losed, sold, moved, or	Last balance before closing or
Within transfer lude childs, coo	a 1 year before you rred? ecking, savings, moperatives, associated. Fill in the details. Financial Institution Street State	filed for bank oney market, iions, and other	ruptcy, were any financial according to other financial accounts; cerer financial institutions. Last 4 digits of account num XXXX————————————————————————————————	counts or instruments held in your restriction to tificates of deposit; shares in banks, the shares of deposit; shares of depos	name, or for your beneft credit unions, brokerage date account was losed, sold, moved, or cansferred	Last balance before closing or transfer
. Within transfer clude chads, coo ✓ No Name of I	a 1 year before you rred? ecking, savings, moperatives, associated. Fill in the details. Financial Institution Street State	filed for bank oney market, iions, and other	ruptcy, were any financial according to other financial accounts; cerer financial institutions. Last 4 digits of account num XXXX————————————————————————————————	counts or instruments held in your retificates of deposit; shares in banks, Therefore Type of account or instrument country Checking Savings Money market Brokerage Other	name, or for your beneft credit unions, brokerage date account was losed, sold, moved, or cansferred	Last balance before closing or transfer
Number City Do you luables*	a 1 year before you rred? ecking, savings, moperatives, associated. Fill in the details. Financial Institution Street State	filed for bank oney market, iions, and other	ruptcy, were any financial according to other financial accounts; cerer financial institutions. Last 4 digits of account num XXXX————————————————————————————————	counts or instruments held in your retificates of deposit; shares in banks, Therefore Type of account or instrument country Checking Savings Money market Brokerage Other	name, or for your beneft credit unions, brokerage date account was losed, sold, moved, or cansferred	Last balance before closing or transfer

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otor 1	Shaun	J	Parr	Case number (if k	nown)
	First Name	Middle	Who else had access to it?	Describe the contents	Do you still have it?
Name of F	Financial Institution		Name		☐ No ☐ Yes
Number	Street		Number Street		
			City State ZIP Code		
City	State	ZIP Code			
√ No		y in a storag	e unit or place other than your home withi	n 1 year before you filed for bankruptc	y?
☐ Yes. F	Fill in the details.		Who else has or had access to it?	Describe the contents	Do you still have it?
Name of §	Storage Facility		Name		☐ No ☐ Yes
			10 		i les
Number	Street		Number Street		
			City State ZIP Code	•	
3. Do you √1 No			or Control for Someone Else hat someone else owns? Include any pro	perty you borrowed from, are storing fo	or, or hold in trust for some
res. r	-III In the details.		Where is the property?	Describe the property	Value
Owner's N	Name		Number Street		
Number	Street				
			_ City State ZIP Code		
City	State	ZIP Code			

48 of 70 Debtor 1 Shaun Parr Case number (if known) _ First Name Middle Name Last Name Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ✓ No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Number Street Street City State **ZIP Code** City State **ZIP Code** 25. Have you notified any governmental unit of any release of hazardous material? **✓** No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code City State **ZIP Code** 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **✓** No Yes. Fill in the details.

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ebtor 1	Shaun First Name	J Middle	Name Last Nar	me	Ca	ase number (if known)	
			Court or agency		Nature of the case		Status of the case
Case title	9		Court Name				☐ Pending ☐ On appeal
			Number Street				☐ Concluded
Case num	ber		City State	ZIP Code			
art 11:	Give Details Ab	out Your B	usiness or Connecti	ons to Any B	usiness		
27 Within	4 vears hefore vo	u filed for ha	nkruntev did vou own a	husiness or ha	ve any of the following co	nnections to any busir	ness?
					, either full-time or part-time	-	1655 :
				•	•	,	
		-	mpany (LLC) or limited li	iability partnersh	nip (LLP)		
	partner in a partr	·					
□ A	n officer, director,	or managing	executive of a corporation	on			
□ A	n owner of at leas	st 5% of the v	oting or equity securities	of a corporation	1		
✓ No. N	one of the above	applies. Go to	Part 12.				
Yes. C	Check all that appl	y above and f	fill in the details below for	r each business			
			Describe the nature	of the business	Employe	r Identification number	
Name			-			clude Social Security	
Name					EIN:		
Number	Street		-				
	0001		Name of accountant	or bookkeeper	Dates but	siness existed	
			•		From _	То	
					110111		
City	State	ZIP Code					
creditors, o	2 years before yo or other parties. Fill in the details be		nkruptcy, did you give a	financial stater	nent to anyone about your	business? Include all	financial institutions,
			Date issued				
Name			MM / DD / YYYY				
Number	Street						
Mannoci	5551						
			-				
			-				
City	State	ZIP Code					

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_		
De	htor	1

Shaun	J	Parr	Case number (if known)
First Name	Middle Name	Last Name	,

Part 12: Sign Below	
nave read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a ankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. As Shaun J Parr	
•	
Date <u>01/30/2024</u>	
	for Bankruptcy (Official Form 107)?
	forms?
☐ Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of New York

In re	F	Parr, Shaun J				
				Case No.		
Debto	or			Chapter	13	
			DISCLOSURE OF COMPENS	ATION OF ATTORNEY F	OR DEBTOR	
1.	con	npensation paid to	. § 329(a) and Fed. Bankr. P. 2016(b), me within one year before the filing of behalf of the debtor(s) in contemplation	the petition in bankruptcy, or ac	greed to be paid to m	ne, for services rendered
	For	legal services, I ha	ave agreed to accept			\$6,000.00
	Pric	or to the filing of thi	s statement I have received		<u> </u>	\$1,000.00
	Bala	ance Due				\$5,000.00
2.	The	e source of the con	npensation paid to me was:			
	\(\sqrt{1} \)	Debtor	Other (specify)			
3.	The	e source of comper	nsation to be paid to me is:			
	V	Debtor	Other (specify)			
4.		I have not agreed firm.	to share the above-disclosed comper	nsation with any other person ur	nless they are member	ers and associates of my
		_	share the above-disclosed compensation agreement, together with a list of the	·		
5.	In r	eturn for the above	e-disclosed fee, I have agreed to rende	er legal service for all aspects of	the bankruptcy case	e, including:
	a.	Analysis of the d bankruptcy;	lebtor' s financial situation, and renderi	ing advice to the debtor in deter	mining whether to file	e a petition in
	b.	Preparation and	filing of any petition, schedules, stater	ments of affairs and plan which	may be required;	
	C.	Representation of	of the debtor at the meeting of creditor	s and confirmation hearing, and	l any adjourned hear	ings thereof;
6.	Ву	agreement with the	e debtor(s), the above-disclosed fee do	pes not include the following ser	rvices:	
	Mot	tion practice, adve	rsary proceedings, loss mitigation, pos	t-confirmation plan modification	S	

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/30/2024 /s/ Scott J Goldstein

Date Scott J Goldstein

Signature of Attorney

Bar Number: 4291811

Law Offices of Wenarsky & Goldstein LLC 410 Route 10 West Ste 214

Ledgewood, NJ 07852

Pg

Phone: (973) 453-2838

Law Offices of Wenarsky & Goldstein LLC

Name of law firm

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.

 Consumer debts are defined in 11 U.S.C. §
 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$78	administrative fee
+	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- most domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms /bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury-either orally or in writing-in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy(Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called ajoint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa /ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts /Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

24-35097 Filed 01/31/24 Entered 01/31/24 09:36:24 Main Document Check as directed in lines 17 and 21: Fill in this information to identify your case: According to the calculations required by this Statement: Debtor 1 Shaun First Name Middle Name Last Name ☐ 1. Disposable income is not determined. under 11 U.S.C. § 1325(b)(3). Debtor 2 (Spouse, if filing) ✓ 2. Disposable income is determined First Name Middle Name Last Name under 11 U.S.C. § 1325(b)(3). Southern District of New York United States Bankruptcy Court for the: 3. The commitment period is 3 years. Case number 4. The commitment period is 5 years.

✓ 1. The commitment period is 5 years.

✓ 2. The commitment period is 5 years.

✓ 3. The commitment period is 5 years.

✓ 4. The commitment period is 5 years.

✓ (if known) Check if this is an amended filing Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period 10/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commissions (before all	\$6,461.58	\$4,333.33
3. Alimony and maintenance payments. Do not include	de payments from a spouse.	\$0.00	\$0.00
4. All amounts from any source which are regularly your dependents, including child support. Include unmarried partner, members of your household, you roommates. Do not include payments from a spous on line 3.	regular contributions from an ur dependents, parents, and	\$0.00	\$0.00
5. Net income from operating a business, profession farm	1, or Debtor 1 Debtor 2		
Gross receipts (before all deductions)	\$0.00 \$0.00		
Ordinary and necessary operating expenses	- \$0.00 - \$0.00		
Net monthly income from a business, profession, or	r farm \$0.00 \$0.00 Co	ppy \$0.00	\$0.00
6. Net income from rental and other real property	Debtor 1 Debtor 2		
Gross receipts (before all deductions)	\$0.00 \$0.00		
Ordinary and necessary operating expenses	- \$0.00 - \$0.00		
Net monthly income from rental or other real proper	ty \$0.00 Co	ppy \$0.00	\$0.00

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Debtor 1 Shaun J Parr 58 of 70
First Name Middle Name Last Name

Case number (if known)

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
7. Interest, dividends, and royalties	\$0.00	\$0.00	
8. Unemployment compensation	\$0.00	\$168.00	
Do not enter the amount if you contend that the amount received was a benefit under			
the Social Security Act. Instead, list it here:			
For you			
For your spouse\$0.00			
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$0.00	\$0.00	
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.			
Total amounts from separate pages, if any.	+	+	
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$6,461.58	+ \$4,501.33	= \$10,962.91 Total average
			monthly income
Part 2: Determine How to Measure Your Deductions from Income			
12. Copy your total average monthly income from line 11.			\$10,962.91
13. Calculate the marital adjustment. Check one:			
☐ You are not married. Fill in 0 below.			
☐ You are married and your spouse is filing with you. Fill in 0 below.			
☑ You are married and your spouse is not filing with you.			
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid your dependents, such as payment of the spouse's tax liability or the spouse's support of dependents.			
Below, specify the basis for excluding this income and the amount of income devoted to additional adjustments on a separate page.	each purpose. If neces	sary, list	
If this adjustment does not apply, enter 0 below.			
+-			
Total	\$0.00 Copy	here. \rightarrow	\$0.00
14. Your current monthly income. Subtract the total in line 13 from line 12.			\$10.962.91

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Debtor 1	Shaun First Name	J	Idle Name	Parr Last N			Ca	ase number (if known) _	
15 Coloui									
	ate your current r	-	_						\$10,962.91
	Jopy line 14 here fultiply line 15a by								x 12
IV	iditiply lifte 13a by	12 (the num		iii a yeai).					
15b. ⁻	The result is your	current month	nly income for t	the year for	r this part of the	form			<u>\$131,554.92</u>
16. Calcul	ate the median fa	mily income	that applies to	you. Follo	w these steps:				
16a. I	Fill in the state in v	vhich you live			Ne	w York			
16b. I	Fill in the number of	of people in y	our household			4			
16c. F	Fill in the median f	amily income	for your state	and size of	f household				\$126,194.00
	o find a list of appl estructions for this						e separate		
17. How d	o the lines compa	are?							
17a.	Line 15b is le	ess than or eq 5(b)(3). Go to	ual to line 16c	. On the top	p of page 1 of the	nis form, check bo our Disposable Ind	ox 1, <i>Dispo</i> come (Offic	osable income is not de cial Form 122C–2).	etermined under 11
17b.	Line 15b is m 1325(b)(3).	nore than line So to Part 3 a	16c. On the to	p of page culation of	1 of this form, cl	heck box 2, Dispo	osable inco	ome is determined under 2C-2). On line 39 of the	er 11 U.S.C. § at form, copy your
Part 3: C	alculate Your (Commitmer	nt Period Un	der 11 U	.S.C. §1325(k	0)(4)			
18. Copy y	our total average	monthly inc	ome from line	11					\$10,962.91
19. Deduc	t the marital adjus	stment if it ap	plies. If you a	re married,	your spouse is	not filing with you	u, and you	contend that	Ψ10,002.01
calcula								s income, copy the	
19a. If t	he marital adjustm	nent does not	apply, fill in 0	on line 19a	l				- \$0.00
19b. S u	btract line 19a fro	om line 18.							\$10,962.91
20. Calcul	ate your current r	nonthly inco	me for the yea	r. Follow th	nese steps.				
20a Cor	y line 19b								\$10,962.91
	tiply by 12 (the nu								x 12
	(, ,		, , , , , , , , , , , , , , , , , , , ,						
20b. The	result is your curi	rent monthly i	ncome for the	year for thi	is part of the for	m.			\$131,554.92
20c. Cop	y the median fam	ily income for	your state and	d size of ho	ousehold from li	ne 16c			\$126,194.00
21. How d	o the lines compa	are?							
☐ Line	20b is less than li	ne 20c. Unles		rdered by t	he court, on the	top of page 1 of	this form, c	check box 3,	
√ Line	20b is more than k box 4, <i>The com</i>	or equal to lin	ne 20c. Unless			court, on the top	of page 1 c	of this form,	
Part 4: S	ign Below								
By sign	ing here, under pe	enalty of perju	ry I declare tha	at the inforr	mation on this s	tatement and in a	ny attachn	nents is true and correc	ct.
~									
^	/s/ Shaun J Parr				_				
	orginature of Debit	<i>Ο</i> 1 Ι							
	Date 01/30/2024 MM/ DD/ Y	YYY							
•	necked 17a, do No				n. On line 39 of	that form, copy vo	our current	monthly income from I	line 14 above.

24-35097 Doc 1 Filed 01/31/24 Entered 01/31/24 09:36:24 Main Document Fill in this information to identify your case: Debtor 1 Shaun Parr First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name **Southern District of New York** United States Bankruptcy Court for the: Check if this is an Case number amended filing (if known) Official Form 122C-2 Chapter 13 Calculation of Your Disposable Income 04/22 To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1). Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). Part 1: Calculate Your Deductions from Your Income The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1. If your expenses differ from month to month, enter the average expense. Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases. 5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. **National Standards** You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National \$1.993.00 Standards, fill in the dollar amount for food, clothing, and other items.

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

61 of 70 Debtor 1 Shaun Case number (if known). First Name Last Name Middle Name People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$79.00 Number of people who are under 65 Copy \$316.00 7c. Subtotal. Multiply line 7a by line 7b. \$316.00 here -People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$154.00 7e. Number of people who are 65 or older \$0.00 Copy \$0.00 Subtotal. Multiply line 7d by line 7e. \$316.00 7g. Total. Add lines 7c and 7f. \$316.00 Copy here \rightarrow Local **Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities – Insurance and operating expenses Housing and utilities – Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in \$776.00 the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount \$1,717.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Average monthly Name of the creditor payment ROCKET MORTGAGE, LLC \$1,342.00 Repeat this amount Copy 9b. Total average monthly payment \$1,342.00 on line 33a. here \rightarrow 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If \$375.00 \$375.00 Copy here →..... this number is less than \$0, enter \$0. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects \$0.00 the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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62 of 70 Debtor 1 Shaun Case number (if known) -First Name Middle Name Last Name 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. **☑** 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 13a. Ownership or leasing costs using IRS Local Standard..... 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment Copy Repeat this amount Total average monthly payment here \rightarrow on line 33b. 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. If this number is less than \$0, enter \$0...... expense here → Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this amount Total average monthly payment here \rightarrow on line 33c. 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from 13d. If this number is less than \$0, enter \$0...... expense here → 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public \$0.00 Transportation expense allowance regardless of whether you use public transportation. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the \$0.00 IRS Local Standard for Public Transportation.

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Debtor 1 Shaun J Parr 63 of 70

Shaun J Parr 03 01 70 Case number (if known) ______

	ther Necessary openses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.	
16.	social security taxes, you expect to receive that is withheld to pay	hly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount for taxes. tate, sales, or use taxes.	\$2,628.64
17.	uniform costs.	ns: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and ts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$0.00
18.	include payments that	otal monthly premiums that you pay for your own term life insurance. If two married people are filing together, you make for your spouse's term life insurance. ms for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance	\$0.00
19.	spousal or child suppo	Ints: The total monthly amount that you pay as required by the order of a court or administrative agency, such as ort payments. Ints on past due obligations for spousal or child support. You will list these obligations in line 35.	\$0.00
20.		nonthly amount that you pay for education that is either required:	\$0.00
	as a condition for yfor your physically	our job, or or mentally challenged dependent child if no public education is available for similar services.	
21.		nonthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. In this for any elementary or secondary school education.	\$0.00
22.	health and welfare of only the amount that i	e expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include is more than the total entered in line 7. Insurance or health savings accounts should be listed only in line 25.	\$0.00
23.	dependents, such as necessary for your he employer. Do not include payme	and telephone services: The total monthly amount that you pay for telecommunication services for you and your pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent alth and welfare or that of your dependents or for the production of income, if it is not reimbursed by your ants for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as 5 of Form 122C-1, or any amount you previously deducted.	+ \$0.00
24.	Add all of the expens Add lines 6 through 23	es allowed under the IRS expense allowances.	\$6,684.64
	dditional Expense eductions	These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.	
25.		ability insurance, and health savings account expenses. The monthly expenses for health insurance, disability savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	
	Health insurance	<u>\$178.55</u>	
	Disability insurance	<u>\$0.00</u>	
	Health savings accor	ınt + <u>\$0.00</u>	
	Total	\$178.55 Copy total here →	\$178.55
	Do you actually spend	this total amount?	
	☐ No. How much do	you actually spend?	
	✓ Yes		
26.	The actual monthly exill, or disabled member	ons to the care of household or family members. penses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically r of your household or member of your immediate family who is unable to pay for such expenses. These contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).	\$0.00
27.	family under the Fami	mily violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your ly Violence Prevention and Services Act or other federal laws that apply. I keep the nature of these expenses confidential.	\$0.00

ebto	or 1	Shaun	J	Parr	04 01 70		Case number (if k	nown)		
		First Name	Middle Name	Last Name			(,		
3.	Additional	home energy cos	sts. Your home energy	costs are include	ed in vour insur	ance and operatir	na expenses on line	8.		
	If you belie		nome energy costs that		•	•	•		\$0.00	
	-	give your case trus and necessary.	stee documentation of	your actual expe	nses, and you n	nust show that the	e additional amount	claimed is		
9.			oendent children who lent children who are y						\$0.00	
			stee documentation of nd not already accour			nust explain why	the amount claimed	is		
	* Subject to	o adjustment on 4/	/01/25, and every 3 ye	ars after that for	cases begun on	or after the date	of adjustment.			
0.	combined f		g expense. The monthallowances in the IRS all Standards.						\$0.00	
		_	naximum additional all able at the bankruptcy		e using the link	specified in the s	eparate instructions	for this form.		
	You must s	show that the addit	tional amount claimed	is reasonable an	d necessary.					
1.			ibutions. The amount zation. 11 U.S.C. § 54		inue to contribu	te in the form of o	cash or financial instr	ruments to a	\$0.00	
	-	_	nore than 15% of your		come.					
2.		the additional exp 25 through 31.	ense deductions.					[\$178.55	
Ded	uctions for D	Debt Payment								
3.		For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.								
	To calculate	e the total average	e monthly payment, ac or bankruptcy. Then d		at are contractu	ally due to each s	secured creditor in			
		,					Average monthly payment			
	Mortgage	s on your home					-			
		•				→	\$1,342.00			
		your first two vel								
						→				
	33d. List o	other secured deb	ts:				_			
	Name of secured	each creditor for debt	other Identi debt	fy property that s	secures the	Does payment include taxes of insurance?				
						☐ No ☐ Yes				
						☐ No				
						Yes				
						☐ No				
						☐ Yes	+			
							\$1,342.00	Copy total		

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Shaun

Debtor 1

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65 of 70 Debtor 1 Case number (if known). Middle Name First Name Last Name Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. $oldsymbol{rac{1}{2}}$ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor **Total cure** Monthly cure Identify property that secures the debt amount amount 1500 sqft 3 bed 2 bath house on 558.65 about 2.2 acres $\div 60 =$ ROCKET MORTGAGE, LLC \$33.519.00 126 Frey Rd Pine Bush, NY 12566 $\div 60 =$ $\div 60 =$ Copy total \$558.65 \$558.65 here Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims..... ÷ 60 36. Projected monthly Chapter 13 plan payment \$0.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 8.80% Copy \$0.00 total Average monthly administrative expense here -\$0.00 37. Add all of the deductions for debt payment. Add lines 33e through 36. \$1,900.65 **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances \$6,684.64 Copy line 32, All of the additional expense deductions..... \$178.55 Copy line 37, All of the deductions for debt payment..... \$1,900.65 Copy total \$8,763.84 \$8,763.84 Total deductions..... here

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66 of 70 Debtor 1 Case number (if known). First Name Middle Name Last Name Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 \$10,962.91 Statement of Your Current Monthly Income and Calculation of Commitment Period. Fill in any reasonably necessary income you receive for support for dependent children. \$0.00 The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your \$0.00 employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here → \$8,763.84 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Copy here \$0.00 Total \$0.00 \$8.763.84 Total adjustments. Add lines 40 through 43..... Copy here -\$8,763.84 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. \$2,199.07 Part 3: Change in Income or Expenses Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? 122C-1 Increase ☐ 122C-2 Decrease 122C-1 ☐ Increase ☐ 122C-2 Decrease

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Debtor 1 Shaun J Parr 67 0f 70
First Name Middle Name Last Name

Case number (if known) ___

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

/s/ Shaun J Parr

Signature of Debtor 1

Date 01/30/2024 MM/ DD/ YYYY

IN THE UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK POUGHKEEPSIE DIVISION

IN RE: Parr, Shaun J CASE NO
CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

Date	01/30/2024	Signature _	/s/ Shaun J Parr
_		_	Shaun J Parr. Debtor

[case number]

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CAPITAL ONE

Attn: Bankruptcy PO Box Box 30285 Salt Lake City, UT 84130

IRS

Attn: Centralized Insolvency PO Box 7346 Philadelphia, PA 19101

NY State Division of Taxation Bankruptcy/Special Procedures Section Po Box 5300 Albany, NY 12205

ROCKET MORTGAGE, LLC 1050 WOODWARD AVE DETROIT, MI 48226